									Application or Docket Number						
	PATENT A	PPLICATIO Effect	N FEE DE	RD)	()91	08	021	18					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									L EI	NTITY	OR	OTHER SMALL			
TOTAL CLAIMS						7		RAT	E	FEE	[RATE	FEE		
FOR			NUMBER FILED NUMBER			ER EXTRA		BASIC FEE 355.00			OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			// minus 20= *					X\$!)=		OR	X\$18=			
IND	EPENDENT CL	AIMS 6	minus 3 = *					X40=			OR	X80=			
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+13				+270=	/		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOT			OR OR	TOTAL			
CLAIMS AS AMENDED - PART II									AL.	<u></u>	OH	OTHER	THAN		
(Column 1) (Column 2) (Column 3)									LL	ENTITY	OR .	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$:	9=		OR	X\$18=			
	Independent	*	Minus	***		=]	X40)=		OR	X80=			
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		J	+13			1	+270=			
)TAL		OR	TOTAL			
		(Column 1) (Column 2) (Column									OR	ADDIT. FEE		1	
l-		(Column 1) CLAIMS		HIGH	HEST	(Column 3	4		-	ADDI-	1		ADDI-	ł	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RA ⁻	E	TIONAL FEE		RATE	TIONAL FEE		
	Total	*	Minus	**		=		X\$	9=		OR	X\$18=			
AME	Independent	<u> -</u>	Minus	***	-]=	4	X4)=		OR	X80=		ł	
L	FIRST PRESE	NTATION OF M	OUTIPLE DE	PENDEN	I CLAIM			+13	5=		OR	+270=			
								ADDIT	DTAL		OR	TOTAL		1	
	(Column 1) (Column 2) (Column 3								HEE			ADDIT. FEE		1	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total		Minus	**		=		X\$	9=		OR	X\$18=]_	
MEN	Independent		Minus			=		X4				V00	1		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<i>J=</i> ——		OR		 	\mathbf{I}	
								+13			OR	L			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													4		
"	"If the "Highest Nu The "Highest Nur	umber Previously nber Previously P	raid For IN IH aid For" (Total o	or Indepen	dent) is th	e highest num	ber f	ound in	he a	ppropriate b	ox in c	olumn 1.			